PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/538211

CLAIMS AS FILED - PART I													
			(Colum			(Column 2)		SMALL EN		OR	OTHER THAN SMALL ENTITY		
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE	
BASIC FEE			SMALL ENT.	. = \$ 150	LAR	LARGE ENT. = \$ 300		BASIC FEE	 	OR	BASIC FEE	300	
EXAMINATION FEE			Satisfies PCT A			ther situations = \$ 100 / \$ 200	1	EXAM. FEE	 	1.	EXAM. FEE	200	
SEARCH FEE			U.S. is ISA = \$ ALL other cou \$ 200 / \$	\$ 50 / \$ 100 ountries =	All ot	All other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	HOT	
FEE	E FOR EXTRA S	SPEC. PGS.		ius 100 =		/ 50 =	1	X \$ 125 =		1	X \$ 250 =		
тот	TAL CHARGEAE	BLE CLAIMS	20 mir	inus 20 =	•	*		X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	14 m	ninus 3 =			1	X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	IDENT CLAIM PRE	ESENT					+ \$ 180 =		OR	+ \$ 360 =	 	
* If	the difference	e in column 1 is l	less than zero	o, enter "C)" in co	olumn 2		TOTAL		OR	TOTAL	900	
ļ	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						7	SMALL E		OR	OTHER SMALL E	NTITY	
NT A		REMAINING AFTER AMENDMENT		PREVIO	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=]	X \$ 25 =		OR	X \$ 50 =		
AME	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRES	SENTATION OF M	IULTIPLE DEPF	ENDENT C	CLAIM		1	+ \$ 180 =		OR	+ \$ 360 =	.	
							• .	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
,	,	(Column 1)		(Colum	nn 2)	(Column 3)		•	•				
478		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AMEN	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	•	umn 1 is less than the	•	-					,			!	
**	If the "Highest No.	imber Previously Paid	d For IN THIS SP	ACE is less	than '20'	/. enter "20".						ı	

*** If the "Highest Number Previously Pald For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)